



**Connecticut Sexual Assault Crisis Services, Inc.**

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96 Pitkin Street  
East Hartford, CT 06108  
Phone/TTY: 860-282-9881  
Fax: 860-291-9335  
[www.connsacs.org](http://www.connsacs.org)

**Testimony of Connecticut Sexual Assault Crisis Services, Inc.**

**SB 243 AN ACT REQUIRING ACUTE CARE HOSPITALS TO MAKE FORENSIC NURSING SERVICES AVAILABLE TO PATIENTS.**

Laura Cordes, Director of Policy and Advocacy

Submitted to the Public Health Committee

Public Hearing, March 3, 2008

Senator Handley, Representative Sayers, and members of the Public Health Committee, my name is Laura Cordes, and I am the Director of Policy and Advocacy at the Connecticut Sexual Assault Crisis Services, Inc (CONNSACS) and a long standing member of the Commission on the Standardization of the Collection of Evidence in Sexual Assault Investigations.

CONNSACS is the statewide association of nine community-based rape crisis centers in Connecticut. Our mission is to end sexual violence and ensure high quality, comprehensive and culturally competent sexual assault victim services.

During fiscal year 2006-2007 CONNSACS' community-based program staff and volunteers provided services to 4,326 sexual assault victims and their families. Our member centers also provided risk reduction and prevention education to nearly 34,000 children and youth and to over 5,000 members of the general public and training for close to 2,500 professionals, including law enforcement personnel.

We support the intent of SB 243 AN ACT REQUIRING ACUTE CARE HOSPITALS TO MAKE FORENSIC NURSING SERVICES AVAILABLE TO PATIENTS to ensure crime victims' access to forensic examiners, and would like to encourage committee members to consider language that would establish funding for a state rapid response SANE/SAFE program to address the needs of hospitals and sexual assault crime victims.

Connecticut has taken significant steps to establish a standardized sexual assault exam and evidence collection kit and guidelines. A SANE/SAFE program is needed to ensure that there are enough providers trained and available in hospitals to care for sexual assault victims and to collect the evidence needed for the successful prosecution of offenders.

Last year sexual assault crisis counselors responded to over 400 hospital calls at all hours of the day and night to support individuals who had been raped. The overwhelming majority of victims chose to undergo an invasive and lengthy forensic exam in the hopes of capturing evidence that would otherwise be lost.

It is our firm belief that when a skilled SANE/SAFE is utilized, sexual assault victims are more likely to feel supported. A strong first response increases the likelihood that a victim will stay involved with the case and reach out for services and support. These factors help to promote the healing process for victims.

Hospitals facing financial difficulties and overcrowding have been unable to develop or maintain SANE/SAFE programs. There simply are not enough SANE/SAFEs practicing or being utilized at enough hospitals to ensure that sexual assault victims will have access to them. As a result, while we believe that the majority of hospitals try their best, the response and care for sexual assault victims is not consistent.

Throughout the state in most emergency departments rape victims wait several hours to be seen. While victims wait, they are advised, not to brush their teeth, wash, drink, or urinate before the exam. Sometimes the wait and trauma of what they have experienced is too much, and victims return home without having evidence collected.

The exam itself is invasive and time consuming. The nurse who cares for the patient and administers the exam must remain with the patient to maintain the chain of evidence. Many nurses have expressed their discomfort and feel unqualified to perform the exam which includes unbiased and compassionate care and the careful documentation of evidence including the identification of genital injury, and the collection of hair samples, swabs, and finger nail scraping.

While the general practice and training of nurses to become SANE/SAFEs has flourished over the last decade, programs to support and utilize these nurses have been hard to build and maintain. Over the course of my eight years of working for CONNSACS I have seen only three hospitals fund a 24/7 SANE/SAFE program. Due to various reasons including lack of funding, only one remains.

Last year I was invited to a series of national meetings supported by the Department of Justice that brought together representatives from state sexual assault coalitions, and SANE programs to discuss SANE sustainability issues. Other states are struggling too. States face many challenges including lack of collaboration among stakeholders, lack of training, payment for exams and staff turnover. Offering training to nurses to become a SANE/SAFE is not enough. Funding is needed to develop and maintain programs.

Requiring each hospital to support an around the clock staff of SANE/SAFEs would be too costly and inefficient for our state. While we anticipate that the

number of victims who come forward to hospitals would increase once a program was in place, the numbers of sexual assault victims presenting at individual hospitals would not be high enough in all parts of the state to warrant a separate program for each hospital.

Since 2007, CONNSACS has been meeting with emergency physicians, nurses, individual SANE/SAFEs, the Connecticut Hospital Association and advocates to specifically explore ways to improve access to SANE/SAFEs in Connecticut.

We have looked to other states and found a successful program that would meet the needs of a small state. Our proposal is based on the Massachusetts SANE program model which is funded and housed in the Massachusetts Office of Victim Services and has improved patient care and prosecution of sex offenders.

The SANE/SAFE coalition is requesting \$275,000 to launch a statewide SANE/SAFE program, potentially housed in the Office of Victim Services (OVS), which would train and maintain SANE/SAFEs to be available 24 hours a day to participating hospitals for adolescent and adult sexual assault patients. Funding would support the program in its first year including the projected costs of a fulltime program coordinator, SANE/SAFE training, and fees for nurses to be on call to respond to hospital calls. The SANE/SAFE coordinator would work with an advisory committee including representatives from hospitals, physicians, nurses, sexual assault crisis service programs, prosecutors and police to establish SANE/SAFE requirements and standards. In its first year, the program would serve one region of 5-8 hospitals and establish a plan and budget to expand the program statewide.

A State funded rapid response SANE/SAFE program will ensure that Connecticut hospitals have specialized staff, that sexual assault victims receive the best care and treatment, and that State's Attorneys have the best possible evidence to prosecute sex offenders.

Thank you for your consideration. I would be happy to provide additional information or answer questions you may have about our position or services.



## **SANE/SAFE SURVEY**

**January 31, 2008**

### **Initial Findings**

#### **Online survey distributed to ER Nurses and members of CT IAFN**

- 70 total respondents
- 52 out of 70 are interested in participating in an on-call statewide regionally coordinated SANE/SAFE Program
- 39 out of those 52 are SANE/SAFE trained
- 13 out of those 52 are not SANE/SAFE trained
- Out of those 39 who are SANE/SAFE trained, 11 are not currently practicing SANEs

<b>Time willing to be on call</b>	<b>total</b>
<b>12-hours</b>	<b>23</b>
<b>24-hours</b>	<b>22</b>
48-hours	4
72-hours	2

<b>Times willing to be on call per month</b>	<b>total</b>
<b>1-2 times</b>	<b>21</b>
<b>2-4 times</b>	<b>17</b>
4-8 times	11
8-12 times	1

<b>Length of time willing to drive</b>	<b>total</b>
1 hour	12
<b>30 minutes</b>	<b>20</b>
<b>45 minutes</b>	<b>19</b>



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## Overview

### SANE FACTS

#### SANEs in Action

- Sexual Assault Nurse Examiners (SANEs) are specially trained and certified professionals skilled in performing quality forensic medical-legal exams. Should a case go to trial, the SANEs are then available to testify
- SANEs are available by beeper and respond within 40-60 minutes to the designated SANE site ready to care for the victim of sexual assault
- SANEs will document the account of the assault, perform necessary medical exams, testing and treatment, then collect crucial, time sensitive evidence using the Massachusetts Sexual Assault Evidence Collection Kit distributed by the Executive Office of Public Safety
- A forensic exam performed by a SANE can take up to 4 hours from beginning to discharge of the patient.
- SANEs provide medical care to survivors without interruption, therefore maintaining the chain of evidence from the exam
- SANEs perform exams with state of the art forensic equipment and supplies and are kept up to date with the latest in forensic science developments
- SANEs receive expert training, supervision, and quality assurance monitoring
- SANEs provide preventative treatment for HIV, STDs, and pregnancy

#### SANE Enhances Public Safety through Increased Prosecution of Rapists

- SANEs have testified and provided quality forensic evidence in 54 sexual assault trials of which, 51 have resulted in conviction. Evidence collection along with SANE testimony were important elements in achieving convictions in all of the cases.
- In FY'02 through FY'04 evidence submitted to the Boston and State Police Crime Lab revealed that overall, SANEs are collecting better evidence than non-SANE providers
- Massachusetts DA's anecdotally report alleged perpetrators are more likely to plead guilty before trial when the prosecution presents evidence collected by SANEs, saving enormous prosecution costs.
- Ongoing developments in the science of evidence collection, e.g. DNA testing, require a higher level of expertise and consistency in the collection of evidence for sexual assault cases.
- Standardizing the preservation of the chain of evidence by:
  - Providing expertise by quickly and uniformly incorporating improvements in forensic evidence collection techniques
  - Ensuring that SANE evidence is transported properly to the proper crime lab
  - Monitoring the quality of evidence submitted to the crime lab

- The Emergency Nurses Association has endorsed the MA SANE Program as a national model
- Members of the **Massachusetts SANE Board** include :
  - Boston Police Sexual Assault Unit
  - Jane Doe Inc, the Massachusetts Coalition Against Sexual Assault and Domestic Violence
  - Department of Social Services
  - MA District Attorney's Association
  - Disabled Persons Protection Commission
  - MA Office for Victim Assistance
  - Massachusetts College of Emergency Physicians
  - Emergency Nurses Association
  - Massachusetts Nurses Association
  - Boston Police and State Crime Labs
  - Executive Office of Public Safety, Programs Division

This multi-disciplinary, statewide collaboration has resulted in numerous advancements in the quality of care being delivered and the quality evidence being collected and preserved.

- This information is provided by the Violence Prevention and Intervention Services within the